U.S.C. §121 as follows:

I. Claims 1-3, drawn to a method of generating antigen specific allospecific human suppressor CD8+ CD28- T cells comprising stimulating T cells with allogeneic APCs;

II. Claims 4 and 28-31, drawn to allospecific human suppressor CD8+ CD28- T cells and a vaccine comprising said T cells;

III. Claims 5-7, drawn to a method for generating xenospecific human suppressor CD8+ CD28- T cells comprising stimulating T cells with xenogeneic APCs;

IV. Claims 8 and 32-33, drawn to xenospecific human suppressor CD8+ and CD28- T cells and a vaccine comprising said T cells;

V. Claims 9 and 10, drawn to a method of generating antigen specific allospecific human suppressor CD8+ CD28- T cells comprising stimulating T cells with APC pulsed with allopeptide;

VI. Claim 11, drawn to allospecific human suppressor CD8+ CD28- T cells obtained by stimulating T cells with APC pulsed with allopeptide;

VII. Claims 12 and 13, drawn to a method of determining whether a level of the immunosuppressant therapy given to a subject requires reduction;

VIII. Claims 14, 15 and 18, drawn to a method of reducing the risk of rejection of an allograft in a subject comprising reintroducing the expanded T suppressor cells into the subject;

IX. Claims 16 and 19, drawn to a method of reducing the level of rejection of an allograft in a subject comprising administering to the subject T cells that are primed with allogeneic APC;

X. Claims 17 and 20, drawn to a method of reducing the level of rejection of an allograft in a subject comprising administering to the subject T cells that are primed with APC pulsed with allopeptide;

XI. Claims 21 and 22, drawn to a method of preventing rejection of a xenograft comprising reintroducing the expanded T suppressor cells into the subject;

XII. Claim 23, drawn to a method of preventing rejection of a xenograft comprising administering to the subject T cells primed with xenogeneic APC;

XIII. Claims 24 and 25, drawn to a method of preventing autoimmune disease comprising reintroducing the expanded T suppressor cells into the subject;

XIV. Claim 26, drawn to a method of preventing autoimmune disease comprising administering to the subject T cells primed with allgeneic APC;

XV. Claim 27, drawn to a method of preventing autoimmune disease comprising administering to the subject T cells primed with APC pulsed with allopeptide;

XVI. Claims 34-36 and 38, drawn to a method of inducing anergic T helper cells which comprises incubating APC with allospecific T cells;

XVII. Claims 34, 35 and 37, drawn to a method of inducing anergic T helper cells which comprises incubating APC with xenospecific T cells;

XVIII. Claims 39-41 and 43, drawn to a method of generating a tolerogenic APC which comprises incubating APC with allospecific T cells;

XIX. Claims 39, 40 and 42, drawn to a method of generating a tolerogenic APC which comprises incubating APC with xenospecific T cells;

XX. Claims 44-46, 48 and 56, drawn to a method of reducing the level of rejection of an allograft tissue or organ comprising administering to the subject tolerogenic APC which overexpress MIR, wherein said APC have been incubated with allospecific T cells;

XXI. Claims 44, 45 and 47, drawn to a method of reducing the level of rejection of an allograft tissue or organ comprising administering to the subject tolerogenic APC

which overexpress MIR, wherein said APC have been incubated with xenospecific T cells;

XXII. Claims 49-51 and 53, drawn to a method of suppressing an autoimmune disease comprising administering to the subject APC, wherein said APC have been incubated with allospecific T cells;

XXIII. Claims 49, 50 and 52 drawn to a method of suppressing an autoimmune disease comprising administering to the subject APC, wherein said APC have been incubated with xenospecific T cells;

XXIV. Claims 54 and 55, drawn to a method of suppressing an autoimmune disease comprising administering to the subject APC, wherein said APC overexpress MIR; and

XXV. Claim 57, drawn to a method of inducing tolerance to a xenograft tissue or organ in a subject comprising administering APC which overexpress MIR.